

2020

City of Warwick

Dog License Application

**Renew annually by mail during the month of April **

Mail rabies certificate, \$10 check & self-addressed stamped envelope to:

City Clerk's Office/Dog License- Warwick City Hall 3275 Post Road Warwick, RI 02886

Date:	Lic#:		
Pursuant to the general laws of l chapter 4, a license is hereby gra	_	ter 13 and the City of	Warwick ordinance
Last Name:	First name	First name:	
Address:	Zip:		
Phone:	Cell:		
To keep one dog until the thirted as follows:	enth day of April 2021, which is	duly registered in this	s office and is described
Breed:	Age:	Years	Months
Female	Male		altered
Color:	Dogs Name:		
Rabies Exp:	Vet:		